PTO/SB/22 (12-04)
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of 1995, no persons are required to respond to a collection of information unless if displays a solid OMB control surples.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection  PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)  FY 2005  (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 2519-0122PUS1	
		Filed Se	 ptember 9, 2003
pr PWM BUFFER CIRCUIT FOR ADJUSTING A FREQUENCY AND A DUTY CYCLE OF A PWM SIGNAL			
Art Unit 2816		Examiner	A. T. Luu
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.  The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	<u>Fee</u>	<b>Small Entity Fee</b>	
One month (37 CFR 1.17(a)(1))	\$120	\$60	<u> </u>
X Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ 450.00
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$
Four months (37 CFR 1.17(a)(4))	\$1590	<b>\$795</b>	\$
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
Applicant claims small entity status. See 37 CFR 1.27.  X A check in the amount of the fee is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director has already been authorized to charge fees in this application to a Deposit Account.  X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.			
I am the applicant/inventor.  assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. Registration Number			
attorney or agent under 37 Cl		00.004	
Registration number if acting u	naer 37 CFR 1.34	32,334	•
Signature		September 5, 2006  Date	
Joe McKinney Muncy		(703) 205-8026	
Typed or printed name		Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  Total of 1 forms are submitted.			

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PTO/SB/17 (01-06)

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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/657,181-Conf. #1619 Application Number FEE TRANSMITTAL September 9, 2003 Filing Date For FY 2006 Chun-Lung CHIU First Named Inventor **Examiner Name** A. T. Luu Applicant claims small entity status. See 37 CFR 1.27 2816 Art Unit 2519-0122PUS1 TAL AMOUNT OF PAYMENT (\$) 950.00 Attorney Docket No. **VIETHOD OF PAYMENT** (check all that apply) Credit Card Money Order None Other (please identify): Check Birch, Stewart, Kolasch & Birch, LLP Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayment of Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 300 150 500 250 100 Utility 130 Design 200 100 100 50 65 300 150 160 80 Plant 200 100 300 150 500 250 600 300 Reissue 200 100 0 0 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues) 200 100 180 Multiple dependent claims 360 **Multiple Dependent Claims Total Claims Extra Claims** Fee Paid (\$) Fee (\$) Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Extra Claims Indep. Claims HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Fee Paid (\$) **Extra Sheets** Number of each additional 50 or fraction thereof Fee (\$) **Total Sheets** - 100 = /50 (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) 500.00 Notice of Appeal

SUBMITTED BY Registration No 32.334 Telephone (703) 205-8026 Signature (Attorney/Agent) Name (Print/Type) Joe McKinney Muncy September 5, 2006

Other (e.g., late filing surcharge): 1252 Extension for response within second month

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